

Atty. Dkt. No. 026032-3851

CERTIFICATE OF MAILING
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Commissioner for Patents: PO Box 1450. Alexandria.

Virginia 22313-1450, on the date below.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hake et al.

Title:

SEAT BACK FOR A VEHICLE

SEAT COMPRISING AN INTEGRATED PROTECTIVE

**DEVICE** 

Appl. No.:

10/049,698

Filing Date:

6/24/2002

Examiner:

Edell, Joseph F.

Art Unit:

3636

## AMENDMENT AND REPLY TRANSMITTAL

Mail Stop NON-FEE AMENDMENT Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450 RECEIVED
SEP 2 9 2003
GROUP 3600

Sir:

Transmitted herewith is a reply and amendment in the above-identified application. It is Applicants' understanding that the present response is timely filed today, September 22, 2003 within the three month reply period provided by the Patent Office because the Patent Office was closed on Friday, September 19, 2003 due to hurricane Isabel. However, if any extension fee is due, please charge deposit account 06-1447.

## [X] Application Data Sheet.

## [X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For	,	Extra Claims Present		Rate	*	Additional Claims Fee
Total Claims:	21		22	=	0	х	\$18.00	=	\$0.00
Independents:	1	- <sub>-</sub> -	3	. =	0	x	\$84.00	=	\$0.00
First presentat Claims:	ion of any	Mul	tiple Depe	ende	ent	+	\$280.00	-=	\$0.00
					CLAIM	S FE	E TOTAL:	=	\$0.00

[]	Applicant hereby petitions for an extension of time	under 37 C.F.R.	§1.136(a) for the
	total number of months checked below:		

\$0.00	\$110.00	Extension for response filed within the first month:
\$0.00	\$410.00	Extension for response filed within the second month:
\$0.00	\$930.00	Extension for response filed within the third month:
\$0.00	\$1,450.00	Extension for response filed within the fourth month:
\$0.00	\$1,970.00	Extension for response filed within the fifth month:
\$0.00	N FEE TOTAL:	EXTENSION
\$0.00	\$110.00	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):
\$0.00	R FEE TOTAL:	CLAIMS, EXTENSION AND DISCLAIMER
\$0.00	ct ½ of above):	Small Entity Fees Apply (subtra
\$0.00	TOTAL FEE:	

- [ ] Please charge Deposit Account No. 06-1447 in the amount of \$0.00. A duplicate copy of this transmittal is enclosed.
- [ ] A check in the amount of \$0.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

9/22/03

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